## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 5/6/08	Address:	Beamy In D Krester Da
Case #: 96F03059 County: Bactratom D		Columbus, In
County: Botherone		_ <del>_</del>
Type of Laboratory Seizure (check one)  ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)	Seizure Location (c Residence Outbuilding Vehicle	heck all that apply)  Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open a	ir, ete)	
(check all that apply)  Lithium/Ammonia Reaction(s):		
Red Phosphorous/Iodine Reaction(s):		
Flammable Solvents:		
Water Reactive Metal (Lithium):		
Anhydrous Ammonia: Open A.A.		
Uydrochloric Acid Gas Generator(s):		
Corrosive Acid:		
▼ Corrosive Base:		
Other (item and location):		
Child under age 18 discovered (check one)  Yes (number present)  No  If yes, fax report to Child Protective Services	Ephedrine	• Information ·/Pseudoephedrine Tracking Log rehant Tip
This report is to be faxed to the following agencies that serve the location:		
Fire Department: Churcher Fix	Fax: 172-3	
Ilealth Department: Books منا د مسونه دهموه	Fax: <b>४१८-379</b> Fax:	
Child Protection Service:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Houseway Phone 317-2217-1852		
** This form is to be fixed to the fire Department, Health Department and/or Child Protection Services Topograms		

This form is to be included with the case life, and a copy sent to the Claudestine Laboratory Team Leader for retention.

to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.